WFA



OBSERVATIONS

ON THE

DIETETIC AND HYGIENIC TREATMENT

Tuberculous Consumption.

By a Layman.

" Γνωθι σεαυτον."

The profoundly wise do not declaim against superficial knowledge in others, so much as the profoundly ignorant; on the contrary, they would rather assist it with their advice, than overwhelm it with their contempt,—for they know that he who has a little knowledge is far more likely to get more than he who has none.—REV. C. C. COLTON.

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A FTER a man finds that he has what is called consumption, in any one of the many forms in which it appears,—after he has tried in vain a greater or less number of remedies, varying according to the number and anxiety of his friends and his own credulity,—and after he has convinced himself that his case is serious, he begins, often when it is too late, to observe what course of action and what kinds of food affect him favorably or injuriously; that is to say, being told to "take care of himself," and desiring to do so, he begins to try to learn how.

Having taken some "observations," and verified some of them by my own experience, I propose to record them for the benefit of others.

To a great degree, every invalid must find out for himself what is good for him; but there are certain general principles well proven, and so well known to physicians, that often they are passed over as axioms too self-evident even to be mentioned; and yet it is to constant attention to these trifles that every consumptive invalid must owe his recovery. Medicines, every able physician knows, are of little use,—sometimes they are not only futile but fatal.

I would not imply that an invalid ought to do without a physician; but he should try to secure the advice of one who will allow him to make use of all of his own senses, will encourage him to observe his own case, will guard him against errors, and will confine the use of drugs, as much as possible, to the correction of some acute or sudden turn, phase of, or change in, the disease, and to the alleviation of some of the symptoms which most distress him.

Of the various forms of consumption, (Appendix A) that which is most common, most lingering, and will, nevertheless, most surely yield to patient care and proper treatment, is what the doctors call *Phthisis Tuberculosa*, or tuberculous consumption. It is marked by the formation of small ulcers or tubercles on the inner surfaces of the lungs, by which they are gradually destroyed: the whole system also slowly wastes away; all the powers decline; and the patient dies of debility, or of congestion in the lungs, which stops his breath.

The symptoms are too well known to need enumeration here (Appendix B): the causes which produce them are innumerable. Overwork, overstudy, irregular or badly-prepared food, inordinate grief or anxiety of mind, too long-continued excitement, dissipation, badly-ventilated or overheated rooms, constant exposure to dampness,—in short,

anything which will impair the constitution tends to produce the phthisical state. If this be so, it is common sense to suppose that the mode of curing the disease lies in the return to, and patient persistence in following, those natural laws which have been violated. This is not so easy to do as it would seem; for the appetite of the invalid has become morbid, the taste vitiated, the judgment warped, the temper fitful, and the ability to "think and do those things that are right" is almost gone.

To aid, so far as I may, any of my fellow-sufferers to do as his unperverted powers would teach him he should do, is the purpose of this writing.

THERE are five remedial agents particularly worthy of careful observation,—AIR, EXERCISE, BATHING, CLOTHING and FOOD.

That there should be any proper attention to them first requires, however, that the invalid should be relieved of the absorbing care, work, study, social excitement, or other cause, which may have existed to wear out body or mind. The one object in view must be absorbingly and selfishly the march of improvement. When I first visited Minnesota, the bishop of that State, to whom I had a letter, said to me: "Now, sir, you must make a *business* of getting well." The same attention, watchfulness, forethought

and care necessary to success in keeping a drygoods store, or building a house, are necessary to success in repairing the worn-out or damaged human machine.

Friends often say: "Be cheerful; you'll come out all right; don't think too much about yourself;" and try to amuse the invalid, even to his damage. The consumptive invalid *must* think about himself; nobody else can do his thinking for him. He must accustom himself to watch himself—and often to watch his friends too.

There is no use in being down-hearted about it; the enemy is present—whoever is afraid to look at him is lost.

Supposing, then, that the invalid is going to *try*, I note my observations, first, on

WHAT TO BREATHE.

A consumptive needs pure, cool, dry, sunny air. Warm, damp air is bad: cold, damp air is worse: a change from the first to the second is worst of all. A house, then, so situated that the air the consumptive breathes is full of imperceptible moisture during the day,—which moisture becomes perceptible in dew, fog or heavy dampness when the sun goes down,—is the worst place he can be in. The top of a hill, a sandy soil, scarcity of water in the neighborhood,—these are what a consumptive should desire.

There are places where these desiderata are peculiarly procurable; but I believe that consumption

can be cured without going to the ends of the earth, and therefore I do not wish to discuss here the advantages of this or that "resort." Some observations on the winter climate of Minnesota and of the Southern States, made during journeys and residence there in the winters of 1868–9 and 1869–70, will be found annexed (Appendix C).

Any home in a high, dry situation, with the sun shining on it all day, with one or more open fireplaces for wood or bituminous coal, will do to cure a consumptive in, generally.

The object to be attained is, that the invalid be as many hours as possible out of the twenty-four in a pure, dry, fresh air; out of doors as much as may be consistent with his strength: when in doors, in a room heated by an open fire; when asleep, in a room so well ventilated that in the morning there may be no trace of close, foul air.

The next point is, that this air must be breathed in through the nose—not through the mouth. To "shut your mouth," must be the constant effort. Cold air, if dry, does not hurt a consumptive, unless thrown rapidly against the lungs. If the day be cold, let the overcoat be well buttoned up around the throat, collar turned up, no scarf or muffler around the face: but if walking, let the invalid hold his handkerchief against his nose for a few moments after going out, until the nostrils and parts back of them become accustomed to the low temperature.

Riding is easier, because the exertion of walking

makes breathing more rapid, and induces a spell of coughing. When coughing, try to shut the mouth after the cough, before the air rushes in again down the throat. When talking, (which should be avoided when walking or driving, especially against a wind,) talk in short sentences while expiring, and inspire between the sentences through the nose.

Even if the day be cloudy, cold and raw, the invalid may take a ride in an open carriage, longer or shorter in proportion to his strength, and return home with some feeling of glow. There is some risk in a ride on such a day if the invalid be very weak, and his blood very poor and thin; but anything is better than stagnation.

While to be in the air is a good thing, to be in a draft is as bad a thing as may be. Whether the air be hot or cold, wet or dry,

"If it comes through a hole, Better think of your soul,"—

Dr. Charles D. Meigs used to say. To stand near a cellar-window in the street, or in a store near the door, or in a hall when bidding a friend good-bye through the open street-door,—to open a window to call a passer-by,—to sit with one's back to a window,—either of these is an invitation to a cold.

Horse-cars are dangerous; go as near the front as may be; shut the front door of the car and the windows behind your seat and behind the seat next you, with the apologetic remark, uttered half aloud, "I have been sick."

Do not wait until you are chilled, before you move out of a draft. Go out of church in the midst of any service or sermon: refuse to stop to talk with your dearest friend at the corner of a street,—courtesy may be death.

In order to have the air pass freely into the lungs, an erect position should be maintained. The invalid should study to keep the points of his shoulders thrown back, whether walking, riding, sitting or sleeping. The inspirations should be full, steady,—not with violence or hurry; but the habit of breathing-in quietly but strongly, and breathing-out slowly, so as to keep the lungs full, ought to be acquired.

At first the efforts in this direction must be very gentle, or they may induce hemorrhage; but, as the invalid gets stronger, he should persevere in the endeavor to increase the size of his chest, and the room his lungs have to act in.

Although I think that artificial inhaling apparatus is rather to be avoided, the directions for using an inhaling tube sold by Dr. J. M. Howe, New York, which are given in a pamphlet published by him, seem to me to be consonant with common sense.

How to Exercise.

Exercise is necessary to restore to the body its natural functions. Gentle at first, and gradually increasing with the strength, it should be regular, and a matter of daily duty. If the invalid cannot walk a mile, let him walk a hundred yards, or fifty,

or ten, on a sunny walk, on a sunny porch, in a room with an open fire, and the windows down from the top,—somewhere, anywhere, (so that it be not in a draft,) and, if possible, in the sun.

If riding, let it be in an open carriage, with springs like a barouche, which will rock the invalid about and move as many of his muscles as possible.

Always stop short of fatigue; never be in a hurry; do not walk against a high wind; do not swing the arms; avoid dumb-bells and heavy weights; do not lift the arms up above the head; do not pull on tight boots, nor draw bottle corks; do nothing which will strain the muscles of the chest violently and induce hemorrhage.

In driving, learn to depend upon the strength of the wrist: see that no sudden jerk comes upon the upper part of the arm.

The exercise should be taken in the morning, not sooner than an hour after breakfast, and should cease half an hour before dinner, that the invalid may be thoroughly rested before eating. A quiet walk or short drive again in the afternoon is all that should be indulged in.

An excellent substitute for riding or driving, or an excellent auxiliary in case of a stormy day preventing the usual drive, will be found by having on a sunny porch (or even in the house, if there be no suitable place out of doors) a spring-board. These are almost universally kept on the wide verandas of the houses in the South, and are called jogglingboards. They are simply 1 ¼ inch boards of yellow pine, (ash would do, I presume,) about seventeen to twenty feet long, and twelve to fifteen inches wide, supported at each end on a standard, or rest, sufficiently high to raise the board about two feet from the floor.

Sitting in the centre, and swinging or joggling gently up and down, is a very pleasant way to get a few minutes' or an hour's gentle exercise.

In the evening do nothing: do not talk excitedly, nor play cards, nor get the brain or body in any way out of the calmest possible condition.

Singing, loud talking, arguing, or reading aloud, is the sort of exercise which is at all times to be avoided. As the invalid convalesces, it is well for him to find exercise, both of body and mind, in the rambles necessarily connected with studies like botany or geology, in out-of-door occupations like gardening, or in any business which is not too confining; provided, always, that fatigue must be avoided, and that the invalid should be able to protect himself, in any emergency, from chilling cold, or from draughts of wind, when his skin is moist from exertion.

How to Bathe.

The functions of the skin are most important, most easily attended to, and most generally neglected.

Without going into the usual calculation found in

books on hygiene, on the number of pores in every square inch of skin, which, multiplied by the number of square inches, &c., &c., let it be admitted that the invalid not only desires to maintain that cleanliness which is next to godliness, but wishes to excite his skin to do all it can towards removing the diseased and dead matter within him.

Let him, when he rises, instantly pull on his flannels, put on his stockings and slippers (with horsehair soles); and, if the weather be mild, or if he have a warm dressing-room next to his chamber, let him take a sponge bath, exposing only a part of his body at a time.

First, his chest and one arm (his Canton-flannel shirt hanging on and covering his other arm); then the other; then his loins; and, finally, his legs and feet. Cold but not freezing water should be used; and, after sponging and drying with a towel, the flesh should be rubbed (not violently nor hurriedly) with a rough mitten.

Each part should be covered with the flannel before proceeding to sponge, dry and rub the next. The roughness of the mitten must be according to the delicacy of the skin of the patient; the object being only to redden it slightly, not to excoriate it. I found the cheapest and best mittens could be made by buying rough Turkish towels, and having them cut up into mittens large enough to admit the hand readily. A bristle-strap to rub across the small of the back is a good thing; but a better thing is,

to have an attendant sponge, dry, and rub the back from the shoulders down to the loins,—the patient merely bending forward, and lifting his Cantonflannel shirt, without exposing his chest or arms.

To bathe and rub in this way, and to dress, ought to occupy at least an hour; for nothing should be hurried. If time or strength to bathe the whole body thus be wanting, let part be done one day and part the next: this is better than to do all hurriedly.

If the chamber or dressing-room be too cold, (and the chamber *should* be cold if the weather out of doors be cold, unless a fire be made in the morning especially for the invalid to dress by,) let the sponging be omitted, and rub the body with the dry mitten; washing once or twice a week.

If the patient be very weak, all the rubbing should be done for him.

If the sponging and rubbing can be done with the morning sunlight falling on the patient, it should be so.

All this is troublesome at first, but habit makes it easy; and, when the invalid is accustomed to having his skin kept clean, the omission of the rubbing for a day or so is felt to be a positive discomfort.

When going to bed at night, rub the feet with the dry mitten, then pull the flannel drawers (or flannel skirt) over them, if the bed be cold. If the feet be cold during the day, go to the chamber, rub them with the dry mitten, and put on a pair of dry stockings. If, by doing this half a dozen times a

day, the feet may be kept warm, the trouble is worth taking.

Keep the feet away from the fire. The man who owned the coldest feet I ever knew of, had steel plates on the soles and heels of his boots, that he might sit with his boots against a red-hot stove. Whenever the feet get damp and hot, they will soon be damp and cold; rub them before they get so.

When going into a cool house in summer, with the skin moist with perspiration, go to your dressing-room, take off clothes to the waist, rub the skin dry with the mitten, and put on a dry Canton-flannel shirt.

Never wet the skin when damp, cold, and dead with perspiration.

WHAT TO WEAR.

Next the skin should be worn a short Cantónflannel shirt, day and night, winter and summer. In the heat of summer, the arms may be cut off to within three or four inches of the shoulder. This shirt should be changed daily.

Outside the Canton-flannel shirt, I recommend a red flannel shirt and drawers for men, (and whatever substitute for these a woman can devise for herself,) which should be worn all the year, except in the heat of summer, when they may be given up for merino.

I think cotton stockings are better than woolen;

but each invalid should investigate the matter for himself. Some cotton stockings are hard, and as if made of fine twine: they are bad. I have found brown French stockings which, especially when new, are soft and fuzzy, and I think will keep the feet warmer than any others. They should be used prodigally, as suggested heretofore.

The other clothing should be woolen, not made too tight, and should be changed with the weather. For men's wear in summer, the Scotch mixed goods called Cheviot are superior to anything else. Linen should be tabooed, and, of course, vests or dresses cut low in front. In winter, a pair of knit wristlets should be worn when the weather is cold. Furs are bad. A light overcoat or shawl should always accompany the invalid in summer.

Boots should be thick-soled (but not with double uppers) and large, so as not to cramp the feet. Woolen gloves should supersede kid.

The invalid should always have a pair of slippers, with horse-hair soles in them, by his bedside, and should *never* wear them except in his chamber when dressing or bathing. Slippers are bad things, except on occasions when one would otherwise, of necessity, be in his stocking feet.

WHAT TO EAT.

It is admitted, I believe pretty generally, that consumption is to be mainly attributed to imperfect nutrition. At any rate, it is certain, that in propor-

tion as the system of the consumptive invalid assimilates food more or less rapidly, so is his recovery or decline more or less rapid and certain.

To eat is not always to live; and to live without a quick and easy digestion of that which is eaten, is impossible to the consumptive:

Because the character of the food is so important, and because the varying forms of the disease make some things agree with one and not with another invalid, I approach the subject with diffidence.

Generally speaking, the food should be simple and nutritious; and the simple but generous food should be a constant diet. When an invalid has found out what agrees with him, he should stick to that, and avoid everything which disagrees with him as if it were poison. It is poison.

I will endeavor to give a bill of fare which, I think, will agree with almost every one; and will annex some additional articles which none but the convalescing invalid, whose appetite has grown more natural, and who has acquired the skill to discriminate between what does and does not agree with him, and the self-control to discard the latter, should ever taste.

That whatever is cooked, should be properly cooked, so as to be palatable and enjoyable; and that whatever is eaten, should be eaten slowly, with cheerfulness, thankfulness, and as much enjoyment as the invalid is capable of; that it should be well masticated, and not eaten or swallowed hurriedly,

are points too obviously necessary to be enlarged upon.

Breakfast.

Beefsteak, venison steak, broiled rare; lamb chop, mutton chop, broiled well, but not dry; roasted oysters, discarding the eye or hard part; hominy grits, eaten with butter and salt; cold Graham bread; weak tea, with cream.

Of doubtful benefit: broiled fresh fish; soft-boiled eggs; roast white or sweet potatoes; white potatoes stewed in milk; boiled rice; stewed kidneys; stewed oysters. Cracked wheat or oaten grits, with cream, will generally be found to be wholesome.

DINNER.

Roast beef, rare; boiled mutton; roast lamb; boiled fish; roast or boiled fowls; all simple boiled vegetables, especially tomatoes. Dessert: fruit, especially oranges, grapes or peaches. Sometimes a simple custard, apple sago pudding, roast apple and cream; most of the berries in season,—ripe currants with sugar, huckleberries with sugar, but not cream or milk; blackberries. New potatoes and other unripe vegetables should be eaten cautiously.

SUPPER.

Nothing but a cup of tea, not strong, and better without milk or cream; and a cold Graham roll orpiece of Graham bread, without butter; possibly a cold roast apple, but better not.

I believe no consumptive invalid ought ever to eat the following:—Pork, veal, salt or smoked fish or meat, ham, sausages, pies, hot bread or cakes, candy, cake, cheese, nuts, raisins, pickles, sauces, spices, soups, (except beef broth or tea,) rich puddings, bananas, preserves, coffee, chocolate; no gravy except the dish gravy which drips from roasted meats done rare.

How many of those who pretend that they are trying to overcome their disease can affirm that for so brief a time as three consecutive months they abstained from the use of these things?

In the foregoing lists of edibles and of poisons, I have given my own experience and observations. The subject is one which every invalid must study for himself; and, after patiently using for two or three months those articles of diet only which will *certainly* agree with him, his appetite will probably become so natural, and his power of observing correctly so improved, that he can tell immediately, at one trial, whether any new and doubtful article of diet is his enemy.

The farther an invalid progresses in a genuine convalescence,—I mean a convalescence which is the result of a natural diet and of patient effort towards the restoration of a healthy physical condition,—the more readily he can perceive, and the more easily perform, his duty. Every departure from physiological food will probably show him some slight return of some disagreeable symptom, which will disappear when he returns to his well-known rules.

But, in the beginning of his sickness, when he first attempts to "take care of himself," it is different. Everybody and everything,—the well meaning but ill-advising friends, the anxious family, the fitful appetite, the pampered palate, the inflamed lining of the dyspeptic stomach,—all conspire against him. The world, the flesh, and the devil—his friends, his own desire, and his disease—must be equally resisted.

By and by he will be astonished at the return of the natural, childish appetite, which is satisfied with roast beef, boiled mutton, simple vegetables cooked without spices, cold Graham bread, without butter; and craves no more complicated dessert than an apple or an orange.

It takes a world of patience and no small amount of self-denial; but in this effort are, to the consumptive invalid, the issues of life and death.

If there be but one way to cure tuberculous or wasting consumption, and that be to improve the nutrition, then it is certain that it can be done only by patient perseverance in eating only those things that cannot harm, until the strength and power of digestion permit a wider range of diet.

But here comes in the difficulty, that the consumptive has often no appetite at all, and does not assimilate what he does eat; grows thinner and thinner, wastes away in night sweats and expectoration, and can supply no new tissue by digesting quickly highly nutritious food.

Now, I have to recommend a tonic stimulant, to which I believe I owe (humanly speaking) the prolongation of my life, and I know of many others who will give the same testimony. It is simply an infusion of powdered prickly-ash bark in rye whisky diluted with water.

It regulates the bowels if constipated or irregular, appears to clear out the slimy mucous from the stomach, creates an appetite for natural food, and gives tone to the digestive and secretive organs. At least, those were the results I believe I gained from its use.

The proportions are these:—Two ounces of powdered prickly-ash bark (which may be bought at Comfort's herb store, 729 Market street, Philadelphia: as far as I am aware, druggists generally do not keep it) in a quart of rye whisky; let it stand two or three days; pour the infusion off as clear as possible. If the bark be freshly ground it will be too strong, pungent and bitter, and three or four times the amount of whisky should be added. The infusion should be of such a strength that when diluted with water, half-and-half, it is slightly tinged with a greenish hue, and is bitter, somewhat pungent, titillating to the tongue after swallowing, and affords a warming and invigorating sensation.

If it is very burning, it is too strong, and more whisky should be added, until, when diluted with its own volume of water, it may be drunk without inconvenience.

Of this diluted infusion the invalid may take a wine-glassful when rising in the morning, and when going to bed at night, and from a wine-glassful to a tumblerful from an hour to two hours before dinner, according to his susceptibility to stimulants, the amount of exertion he has undergone, and the state of the weather.

In raw, cloudy, damp weather, the system will absorb more of such a tonic than when the air is dry and bracing.

It has seemed to me undesirable to take this tonic at any time after eating; and the less of any other liquor or stimulant the invalid takes, the better for him.

Above, I have said that this tonic regulates the bowels if constipated or irregular. I have noticed that those invalids whose tendency is to constipation can regulate their digestion more readily than if the tendency is the other way. In case of diarrhæa, I would try the effect of a glass of cream, with a table-spoonful of pure rye whisky in it, at breakfast; but I would not recommend the use of the prickly-ash bark whisky while there was any considerable diarrhæa.

I cannot too earnestly repeat my recommendation to any invalid suffering from the early stages of consumption, to give the prickly-ash bark whisky a fair, honest trial, and to continue its use until he shall have entirely recovered, gradually diminishing the quantity. There are some other suggestions which I may add in this place, which might be better explained by a professional pen, but which I write according to "the power given unto me."

Primarily, there seem to be two very different conditions of impaired digestion in consumptive invalids. In one case, the invalid craves fruits, pickles, acids, &c.; the doctors say he has an excess of fibrin: in the other, he craves salt and saline food; and the doctors say he has an excess of albumen.

Generally, as in my case, the first of these conditions exists. The desire for acids should be indulged freely with acid fruits, and particularly with lemon juice. Currants without sugar, lemon juice without water, or sour oranges, may be taken with great relief and benefit.

A slice or two of lemon in a cup of tea (not strong, and but slightly sweetened) is a great addition to it, and quenches the thirst when nothing else will.

Often the free use of lemon juice will prevent night sweats, and diminish the feverish flushes of the invalid.

Two articles of diet are generally approved by physicians, which I have found not to agree with me, and believe do not agree with many others,—milk and eggs. Milk in any form, fresh, or boiled into a custard, or in tea, often slightly increases fever and brings on indigestion. Cream is much preferable, and to most persons beneficial. Both milk and cream are apt to induce or increase constipation of the bowels.

Eggs should be used with great discretion, and never unless the appetite craves them.

Coffee and chocolate are generally injurious, I believe; and, indeed, the less fluid the consumptive takes, the quicker will his stomach recover its tone. A cup of weak tea at breakfast, one glass of water at dinner, and a cup of tea at supper, are sufficient. If thirsty in the forenoon, let the invalid eat an orange or an apple, or some grapes in season; if thirsty in the afternoon, let him squeeze some drops of lemon juice into his mouth.

In summer time, cold tea, not strong, with a slice of lemon in it, will be found very grateful in the evening.

Lee cream or very cold drinks are dangerous: they may produce congestion, and should be partaken of very carefully and in great moderation.

All salads are bad,—not of themselves, but because of the dressing. Lobster, for instance, when fresh and freshly boiled, eaten with salt only and bread, or a leaf of lettuce, is, perhaps, no more indigestible than a slice of cold chicken; but lobster salad is a very different thing.

Cod-liver oil, so generally recommended to the consumptive invalid, has doubtless been of great advantage in many cases. Individually, I prefer to absorb the necessary amount of fatty food in the shape of the well-cooked (but not burned or fried) fat of roast beef, beefsteak and mutton chops. It must be remembered, that the enfeebled system

needs a certain quantity of fuel to keep the fires alive. Fat food, if one can digest it, warms one's body more thoroughly from within, than a good hot furnace fire does from without; but it is well to bear in mind, also, that such food—be it cod-liver oil or fat beef—is only of use when it is readily digested, and that when nausea or loss of appetite, in any degree, follows its use, it does more harm than good.

Let me, then, in recapitulation, as it were, go through the day of a consumptive invalid, recalling, by a word or two, the ideas I have suggested, and enclosing in parentheses those things which should be omitted until the invalid is convalescent.

Fire in chamber, or warm dressing-room adjoining; rise, and instantly pull on flannels; horse-hair soles in slippers; wine-glassful of prickly-ash bark whisky and water; (sponge bath;) dry rub; no hurry; generous breakfast—no fried things; grits or other laxatives at breakfast, if bowels be costive; fruit after breakfast.

Wait indoors until morning dampness is gone,—9 A.M. summer, 11 A.M. winter; take exercise out of doors; ride in open carriage, with hung springs; (walk briskly;) keep mouth shut; rub hands, if cold; stop exercise before fatigue. Return to chamber; rub feet, if cold or damp; dry stockings; dryrub body, if in perspiration. If bowels not very

costive, and if feeling hollow, exhausted and "gone," wine-glass sherry, with raw egg, at noon.

Lie down for half hour, if weary; walk about again; "stir round" generally; half hour before dinner, wine-glass prickly-ash bark whisky and water; dinner, 2 to 3 P. M.—no soup; beef or mutton at every dinner, done rare; no fried vegetables, no compound dishes, no dessert but fruit.

Rest after dinner half an hour; quiet walk or short ride; in house before sundown; rub feet, if damp or cold; no supper but weak tea and lemon and Graham roll; nothing done after supper; bed at nine; mild mustard plaster, if pain in chest; rub feet with dry mitten, and wrap them in flannel; wineglass prickly-ash bark whisky and water.

Good night!

WHEN a consumptive invalid is in his poorest condition, before convalescence is the result of judicious and patient treatment, one of the most dangerous and insidious of his foes is debility. He feels tired; it is luxury to lie still in an easy chair, or propped up with cushions on a sofa: this feeling of apathy or indolence must be fought against.

He should rouse himself for a walk, even of five minutes only, up and down the room, or on a porch in the sun, with his shoulders thrown back; then sit down and rest; then get up again. One invalid in twenty, perhaps, has so much natural energy that this effort will be voluntarily made; with the other nineteen it will be difficult.

If perseverance and persistence should be enjoined on the invalid, so also should patience.

The destructive forces in nature often work very rapidly; the recuperative operations are very slow: but there are few invalids who do not expect the damaging influences of two or three years of declining strength and nervous power to be counteracted by a few weeks or months of care.

It is difficult to get into one's brain the unpleasant fact, that it may take months or years of steady perseverance in the most simple, natural and watchful sort of life to work the gradual healing and restoration of damaged membranes and decaying tissues.

Almost every invalid (who has not lost his energy) injures himself somewhat by striving fiercely to make the most of every chance. There is a fine day, and he says to himself: "Ah, here is the day to get strength in,—I shall walk twice as far as usual to-day;" and night finds him with a fever, pain in the damaged lung, and lassitude in all his frame.

Or, he has a chance at a fine piece of rare roast beef on a day when favorable circumstances have given him an unusual appetite: "Oh, this is what makes blood," says he, and then eats so much that his overloaded system groans at the unequal task.

"Make haste slowly," and "let well enough alone," are two good mottoes. No one should expect to feel constant evidences of improvement: occasional "set-backs" and "blue days" are inevitable." If, comparing one month with the preceding, or with one six months previous, there is considerable or decided advance in strength, appetite, energy, freedom from oppression, or the like, one should be satisfied.

Almost every invalid suffers from pain, more or less constant, and more or less acute, in the lung which is diseased, or in both lungs.

It is customary for physicians to prescribe a blister, or the use of croton oil, to produce an irritation on the skin. For these severe remedies, in many cases, there may be substituted with advantage a mild mustard plaster, used as follows:—Spread upon a thick piece of muslin a plaster made of one part mustard and three to five parts flour, varying the proportion according to the tenderness of the skin; and on the face of the plaster lay a very thin muslin or gauze, so as to prevent the plaster from sticking to the skin.

When going to bed, lay the plaster over the spot which is painful, and let it stay on all night. It should not be so burning as to keep the patient awake. The skin in the morning should only be reddened, not blistered. Have ready one of Alcock's porous plasters, and put it on over the reddened spot: it will prevent taking cold, and will keep up the gentle irritation for some days.

These porous plasters are very good things for the invalid to wear constantly on the weakest part of the chest, and sometimes between the shoulder-blades, if there is pain there. They may be renewed every two or three weeks, or oftener.

The first porous plaster used will probably be very hard to get off, as it sticks obstinately to the hairs of the skin, and they must be cut off patiently with scissors or a sharp knife: after that, the easiest way to remove a plaster, either from the chest or back, is to bend the body into such a position that the skin is made tense, and then let some one take hold of the upper corners of the plaster, and tear it off with a sudden rip. This will be no more painful than a smart slap with the open hand; the quick relief astonishes one.

I do not think the prepared mustard plasters sold by druggists are to be compared with a plaster made in the old-fashioned way,—reduced with flour, as above described.

Some hints about traveling may be of use to the ordinary invalid who is strong enough to take care of himself.

The hand-bag of a gentleman should contain, in addition to the usual toilet articles, the following:—Slippers, (with horse-hair soles,) a rough mitten, a towel, a silk traveling cap, a flask of prickly-ash bark whisky, a Graham roll or two, oranges or

apples; and, in cold weather, if it be possible, a bottle of beef tea.

Check trunks through to the point where you stop at a hotel; and generally, I think, the fewer stops made on the journey, the better. It does not hurt one so much to ride all night in a sleeping-car, as to sleep uncomfortably in the strange, poor bed of an inferior hotel; at least, if the invalid will use the sleeping-car as follows:-Get a section as near the front of the car as possible: the air is purer. Do not have the bed regularly made up: do not undress; let the couch be made, and the mattress laid; arrange a pillow; put on the silk cap; unfasten the collar, and all bands of the clothes which press upon the body and stop the circulation; take off boots and put on the slippers; wrap up in a traveling shawl; and take a little prickly-ash bark whisky and water, and go to sleep. Get up early enough to wash, rearrange dress, and get cool and quiet before changing cars in the early morning air, fortifying the body with a little prickly-ash bark whisky.

There is no use in eating constantly in the cars: if there is not plenty of time to eat a proper meal, or if there be no proper meal to eat, or no appetite, let the dry roll and an orange or apple suffice. There is probably no danger of starving to death. If hungry, or feeling hollow or exhausted, the beef tea will be most grateful, and, with a dry roll, (not a sweet cake,) is as good as a meal, ever so much better than nineteen restaurant meals out of twenty.

When the weather is too warm for a bottle of beef tea to be carried, or if it be unattainable, a raw egg (which may *perhaps* be safely carried in the hand-bag) is a good substitute, taken in a little sherry, or whisky and water.

If feverish, a few drops of lemon juice squeezed into the mouth are profitable and palatable.

Except when the weather is very warm, it is well, by day, to keep the feet and knees wrapped in the traveling shawl: the lower extremities will get cold, and the head hot, unless constant care is taken; and, with all care, it is difficult to prevent this entirely.

About smoking. While it may be safely asserted, in general terms, that the less an invalid smokes, the better, I think that when a man who is in the habit of smoking feels, after dinner, a restlessness and a craving for the taste of tobacco, a mild, good cigar will do him more good than harm.

The distinction made by Mr. Fiske, in his book on "Tobacco and Alcohol," (Leypoldt & Holt, 1869,) between stimulant doses of tobacco, which may be beneficial, and narcotic doses, which are always injurious, seems to be sensible.

Every man must judge for himself. I believe, with Mr. Fiske, (p. 72,) that "any man, moderately endowed with common sense, can tell how much he ought to smoke. The muscular tremor of narcosis

is unmistakable, and a depressed or fluttering pulse is easily detected. When a man has smoked until these symptoms are awakened, let him stop short; he has gone too far already; and let him take good care never to repeat the dose."

INALLY, in all things let the invalid be observant, watchful, careful, cheerful, resigned to his fate, whatever that may be, but determined to avert a decline if it be not inevitable; "not blown about with every wind of doctrine," which those who favor this nostrum or that would have him believe, but intent on following natural laws, and making use of all the common sense that has been given to him.

After all, and above all, he should endeavor to obtain upon his efforts the favor and blessing of Almighty God. "Unless the Lord keep the city, the watchman waketh but in vain." To some this may seem out of place; but I am persuaded that the smile of Him, whose good pleasure it is to be inquired of by His children, will bring success to many measures taken for one's restoration, which would prove only failures if His unsolicited blessings were withheld.



APPENDIX A.

There are three quite distinct forms of consumption, of which specimens may be noticed by any observing person in any resort where numbers of invalids congregate.

Sometimes the symptoms of one form are complicated by some of the peculiarities of another; and, as the medical and dietary treatment which is required by one would be injurious in another, it is important that the diagnosis of the case should be made by a physician whose familiarity with the disease is well assured.

The three forms alluded to are—

Ist. That which has its seat in the membrane of the windpipe, or of the larynx; which has the characteristics of catarrh, nasal or bronchial; the system acting feebly, weight reduced, breathing through the nose obstructed, throat sore, &c.

2d. That which is distinguished by copious and frequent hemorrhages, common in people of sanguine temperament, when the face is full, the color bright, and the appearance that of fine health and

spirits. The stimulating food and drink which are prescribed for the third form would probably injure this class of invalids.

3d. That which is, one might say, scrofulous in its nature,—not by inheritance always, or in the majority of cases, perhaps, but produced by taking cold while the system is in a low, poor, weak condition,—which is distinguished by the formation of tubercles on the inner surfaces of the lungs, which gradually increase in size and number, and so destroy the tissue of the part in which they are lodged. This is tuberculous consumption; and it is in the hope of benefiting those suffering with this form of consumption that I have written the foregoing pages.

APPENDIX B.

Among the earliest symptoms of tuberculous consumption are the following:—A slight, hard or dry cough, sometimes with a little pain in the lung; oppression or weight on the chest; shortness of breath when making any exertion, especially such as going up stairs; debility when rising in the morning; quick pulse, varying from 90 to 120 at different times of the day. Then, as the disease is

more defined and seated, comes, daily, a sense of chilliness along the spine, generally about noon; flushed face and general feverishness towards evening; perspirations, which come on generally after midnight, whether the invalid be covered warmly or not, and are often very profuse, covering the body and limbs with a cold, clammy moisture; sometimes spitting of blood and the expectoration of pus, especially in the morning on rising.

Afterwards, in the advanced stages, there is no mistaking the appearance of the invalid: the nose and cheek-bones become very prominent; the skin is of a bluish paleness, except when the hectic flush, which quickly comes and goes, suffuses the upper part of the cheeks; the eyes are sunken, but of a pearly whiteness, and the teeth become transparent; the corners of the lips are drawn back, so as to produce constantly a sort of painful smile; the shoulder-blades stand out, while the chest is narrowed and sunken, and the spine projects as the front part of the body becomes concave; the stomach is flattened, and the limbs attenuated; and the fingers seem to become lengthened and shriveled, except at the joints, which appear enlarged, while the nails bend or curve round the end of the fingers.

Any symptoms which succeed to these,—the racking cough for the greater part of the night, diarrhæa, which yields to no remedies, rapidly failing strength, loathing of all food, increasing blueness in the fingers, &c.,—are symptoms of the

approaching end, when it may be in the power of the physician to alleviate the sufferings of the patient, but no more.

APPENDIX C.

Having passed five months of the fall and winter of 1868–9 in Minnesota, the spring of 1869 and the winter and spring of 1869–70 in Aiken, South Carolina, and, having traveled through several of the South-western and Southern States, in the effort to restore my health, which several years of quite close confinement to business, with little or no opportunity for exercise in the open air, had seriously impaired, I record here my observations on those places in this country most resorted to by consumptive invalids.

In making some comparison between the climates of Minnesota, Florida, and the sand-hill region of South Carolina and Georgia, and while expressing my own preferences, I admit that "no climate can be recommended indiscriminately to all; that the climate should be selected by an intelligent physician who has carefully studied the case; that the locality which brings life to one brings" [may bring]

"death to another; and, therefore, that, having decided on a change of climate, it is of vital importance to select the right one."—*Brinton's Florida Hand-book*.

The weather in MINNESOTA in September, October and November is usually fine, clear, sometimes bracing and very dry, sometimes Indian-summerish, delightful to the feelings, and rather hazy.

December freezes things up; although there is often, in the later part of November and early in December, some "nasty" weather, rain, snow halfmelted, &c. Then the dry weather begins again, the thermometer in the shade often not rising above the freezing point until the end of February. It is not clear all this time: gray, cloudy and raw days are frequent; and then there seems to be dampness in the air, even although the temperature may be down to zero. After a cloudy spell, it will perhaps snow a little, clear up cold, then get intensely cold for about three days, and, after a gradual rise in the thermometer for a few days, get cloudy again.

It is generally supposed by those who have not passed a winter in Minnesota, that when the weather is cold there is but little wind. This is a great mistake. The winds are often very severe, even when the thermometer is but a few degrees above zero.

March is sometimes fine overhead, and thawing and sloppy under foot, like a fine Philadelphia February. Sometimes it is rough, stormy, raw, windy and disagreeable. This is, however, oftener a description of April,—said to be the most disagreeable month in the year. It is the custom with many of the wealthier residents to take a journey South or East in March and April,—combining business and pleasure if possible; but, at all events, managing to escape from St. Paul.

The principal rain-fall is in the summer months.

It is the *peculiarly dry* weather of the fall and winter which is supposed to benefit the invalid. The dryness of the intensely cold, dry days is *plainly* appreciable: it dries up the throat, and often makes it sore; irritates the larynx and bronchial tubes; and it is positively *bad* for any one with a *throat* disease, I believe. One can distinctly feel this dry air, when breathed through the nose, strike, and as it were parch, the parts at the top of the tubes.

This severe, dry cold also increases the respirations. Before I became acclimated, mine reached forty respirations a minute while I was sitting quietly.

The best thing I can say for the dry, cold air, is, that it acts as a tonic to the skin, often stops night-sweats, and, in some cases, improves the nervous power. On the clear, cold days, when one is very well wrapped up,—a fur overcoat on the coldest days, the mouth kept always shut, and a hand-kerchief tied or held over the nose for the first few minutes after going out of doors,—one feels

invigorated and exhilarated; and, if one's strength be sufficient to walk or ride so as to be in the air nearly all day, there is, with care, a fair chance for improvement. If, on the other hand, a consumptive is subject to throat disease, is much reduced in strength, or suffers from greatly impaired digestion, I think when he goes to Minnesota he takes the first step in his own funeral.

The food in the boarding-houses in St. Paul is fair, and some attention is paid to cooking it in a manner suitable to invalids: beef and venison roasted rare, good boiled mutton, &c. It is customary, however, for the farmers to kill their cattle, sheep and poultry about Christmas: the meat being frozen, is kept piled up like cord-wood until it is eaten. About the middle of January and thereafter, it gets to be very tasteless and dry. No other can be had.

Bathing, even in the most moderate degree, is a difficult operation, especially in the morning. To bend over a quart or two of water, in a foot-tub near a red-hot stove, is not the pleasantest known way to bathe; and when, as is not unfrequently the case, the water is frozen solid in the pitcher, the sponge like a bit of yellow coral, the soap frozen fast to the dish, to omit the bath is human. Then the action of the skin is checked, and dullness of appetite, of spirits, and of circulation, follows.

AIKEN, South Carolina, is on a plateau 600 feet above the sea, being about at the summit of the

water-shed between the Savannah and Edisto rivers, and 300 feet above Augusta, distant only seventeen miles. It stands on the highest point in what is called the sand-hill region of South Carolina and Georgia, a peculiar country, stretching through both those States.

The soil is poor—being white sand from four to six feet deep, with a thin, gray vegetable mould on top: underneath the sand, red clay, fifty to sixty feet deep, through which all the wells have to be bored before reaching water; these are generally seventy-five to one hundred feet deep. The rapid absorption of rain or any dampness by the sandy soil, and its dissipation by the free winds which almost invariably, at the close of a storm, blow across this high plateau, give to Aiken its peculiar pure, light air.

The winter climate is much like a Philadelphia October, without the dampness, but colder. Except in times of unusual drought or rain, the weather changes in cycles: first bright, fine days, gradually growing milder; then a day partially overcast, and several degrees warmer; then ten or twenty hours of gusty rain, often with a high wind, and clearing up cold; perhaps a little ice, which melts before noon; the first day of clear weather rather raw, from the dampness of the ground over which the high wind blows. But the dampness is gone very soon; what the sand does not absorb, the wind blows away. And then come days when every

minute spent indoors between 10 A. M. and 4 P. M. is a minute wasted,—when the air seems so full of sunshine that it cannot hold it, but sends its exhilarating and electrifying sparkle not only into the lungs, but into the very nerve and brain and bodily tissue.

All winters are not alike in Aiken, any more than anywhere else. The winter of 1869–70 (so mild in the North until late in February, and then so unprecedentedly cold until late in March) was the most disagreeable known in Aiken for twenty years. At all times, however, there is considerable changeableness; there are unlooked for falls in the temperature, and sudden overcasts of sky, which make the invalid think that all he has heard about the climate is a fraud; but generally it is over soon, and the seat in front of the fire is deserted again for the bench in the sun by him who is wise enough to take advantage of the opportunities which the quick dissipation of the dampness, and the immediate tonic brilliancy of the atmosphere, afford him.

The thermometer from November to April ranges generally from 26° to 40° at 7 A.M., and from 50° to 65° at noon; occasionally but very rarely falling as low at night as 17° or 20°.

All of the houses are built of wood, with a large open fire-place in every room. Whether asleep or awake, the invalid is in a well-ventilated room: he may be uncomfortable from the cold at times, but he *must* breathe fresh air; and on any fine day he will

find it to his comfort to go out of doors into the sun to get warm, and his blood—not having been vitiated by close, foul air—reacts quickly against the dry coolness of the atmosphere, and is aided to do so by the bright, warm sunshine.

But any invalid who goes to Aiken with hopes of passing an entirely comfortable or enjoyable winter will be disappointed: his symptoms at first may even be aggravated; he is almost sure to catch some cold before he becomes acclimated to the sort of weather inside and outside of the houses; and it is not until the draughts inside have driven him out of doors to breathe continually the bright air,—as tonic and bracing as that of Minnesota, yet sometimes appreciably soft with the balsamic influences of the neighboring pines,—that he will find his strength increasing, and his bronchial oppression less.

If, by stuffing paper into cracks of windows and doors, he manages to make himself comfortable indoors, he will find out, by and by, that he had better have staid at home.

The water at Aiken is very pure and good; and the food at the best boarding-houses much better than in Minnesota, and is every year improving.

The greatest objection to Aiken is found in the severe and sudden changes: they need to be carefully guarded against until the increasing strength of the convalescent is capable of resisting them.

The climate of FLORIDA, although different, of course, on the St. John river, from St. Augustine on

the sea-coast, is everywhere warmer, softer, and, in so far, pleasanter to the invalid. The suns are warm and the air is balmy, except when a norther is blowing: there is less rough, raw, disagreeable weather than at any northern point, and the invalid need make no effort to keep warm and comfortable, but can sit and doze the midday hours away, with the soft, warm, velvety air gently fanning him.

But there is dampness: at Jacksonville, and all along the St. John river, a very light haze hangs over the landscape until an hour or two after sunrise: the moisture drips down tin gutters; quite decided fogs are not infrequent in the early morning. At St. Augustine the dampness is more cool and decided, and the breeze from the sea often raw and chilly.

Changes in the temperature are sometimes sudden and great when a north wind blows after a sultry spell.

The effect upon every invalid is not the same: those whose trouble is bronchial or laryngeal may find the soft air, especially on the upper St. John, about Pilatka, Enterprise, &c., easier to breathe than if it were drier and more bracing; but those whose systems require a tonic air will find no snap or electric twang in the air of Florida: they will rise in the morning, feeling more tired and languid than when they retired; and the appetite is feeble, and all the operations of nature are slow.

The food in Florida is not of the best quality: beef is very poor, venison is good, milk can rarely be obtained (although that is no great matter, in my opinion); fish and oysters are, of course, good at St. Augustine.

In brief, then, the objection to Minnesota is, that the invalid, laden with his many wrappings, and often tired by the time he is completely dressed to go out, has strength sufficient to spend only about three hours a day out of doors; this, at a temperature varying from 30° above to 30° below zero; the other twenty-one hours he spends in an air-tight room, at a temperature of about 75°. Almost anybody can judge whether or no one's lungs can heal readily under such treatment.

The objection to Florida is, that there is not sufficient elasticity and vitality in the air.

Any consumptive invalid, especially one who is liable to hemorrhage, is apt to receive damage from the rapidity with which blood is made under the stimulant of the highly oxygenated air of Minnesota.

The opposite danger exists in Florida; that, relaxed and enervated by the soft, balmy air, the system assimilates food and creates new material too slowly.

Comparing, then, the best winter weather of Minnesota, of Florida, and of the high sandy region of South Carolina and Georgia, (of which Aiken, S. C., is at this writing the most desirable point,) I believe that all the bracing, stimulating and tonic effects of

Minnesota air, all its purity and brilliancy, are felt at Aiken, without the extremely low temperature, and without occasional dampness combined with severe cold.

And I believe that all the advantages of the open, out-of-door life of Florida, of its warm suns by day, and of its thoroughly ventilated sleeping-rooms at night, are found at Aiken, without its debilitating heat, and the soft and pleasant, but enervating and injurious, dampness of its nights and mornings.





